At page 4, line 1, please add a Summary Section:

a2 --SUMMARY OF THE INVENTION

The present invention relates to a method for the early detection and/or quantification of CNS damage in an individual, said CNS damage being caused by space-occupying lesions of the CNS, by invasion of the CNS, by organisms, by anoxia or ischemia, by chemical agents, by physical agents or by a combination of these mechanisms. This method comprises the step of determining and/or quantifying the level of tau in an individual and comparing it to the level of tau in control healthy individuals.--

At page 5, line 27, please add a new Section:

a3 --BRIEF DESCRIPTION OF THE FIGURES

Figure 1. Tau values at diagnosis, before any treatment was given: 1. Control children; 2. AML; 3. AML-CNS+; 4. CML; 5. MDS; 6. B-NHL; 7. Non-B-ALL; 8. Non-B-ALL CNS+; 9. VHR non-B-ALL.

Figure 2. CSF-tau levels in seven patients after acture ischemic stroke. The CSF samples were collected at income (day 0-1), day 2-3, day 7-8, day 21-22 (3 weeks) and day 90-110 (3 months).

Figure 3. CSF-tau levels at the time of maximal release in relation to the size of the infraction as measured by CT scan.--

At page 20, please delete the section entitled "Figure Legends" on lines 5-15.

At page 26, line 13 the text should refer to table 4 instead of table 5, therefore please replace the paragraph on lines 11 - 16 to read:

Q4 --Tau levels in the CSF samples of patients with possible CNS damage caused by space occupying lesions, by invasion or metastasis, by bleeding, infarction or ischemia or by organisms and tau levels in CSF samples of control subjects are show in table 4. The group of patients that had possibly contracted CNS damage by space occupying lesions, by invasion or metastasis, by bleeding, by infarction or ischemia, or by organisms showed an overall higher tau level than the neurological control patients ($p = 0.022$, two sided Mann Whitney test).--

On a new page following the Claims Section, please add the Abstract found on the coversheet:

Q5 **--ABSTRACT**

The present invention provides a new method for the early diagnosis of CNS damage in an individual, said CNS damage being caused by space-occupying lesions of the CNS, by invasion or metastasis of the CNS, by organisms, by anoxia or ischemia, by chemical agents, by physical agents, or by a combination of these mechanisms. This new method comprises the step of determining and/or quantifying the level of tau in said individual and comparing it to the level of tau in control healthy individuals.--

IN THE FIGURES

Please replace original Fig. 2 with the attached corrected Fig. 2, where the legend has been changed from "Patent number" to read --Patient number--.

IN THE CLAIMS:

Please cancel claims 12 and 13.

Please amend claims 5 - 11, 15 and 16 as follows:

5. (Amended) A method according to [any of claims 1 to 4] claims 1 or 2 in which the space-occupying lesion of the CNS is a primary brain tumor, benign or malignant, brain metastasis, or a subdural haematoma.

6. (Amended) A method according to [any of claims 1 to 4] claims 1 or 2 in which the invasion or metastasis of the CNS is by leukemia, lymphoma or breast cancer.

7. (Amended) A method according to [any of claims 1 to 4] claims 1 or 2 in which the organisms are bacteria or viruses causing encephalitis or meningitis.

8. (Amended) A method according to [any of claims 1 to 4] claims 1 or 2 in which the anoxia or ischemia is caused by stroke, by cerebral infarction, by cerebral hemorrhage, by thrombosis, by perinatal asphyxia, by Binswanger disease or by vasculitis.

9. (Amended) A method according to [any of claims 1 to 4] claims 1 or 2 in which the chemical agent is gene therapy, pharmaceuticals, chemotherapy or exposure to chemical compounds.

10. (Amended) A method according to [any of claims 1 to 4] claims 1 or 2 in which the physical agent is a trauma, stroke, intracranial pressure or radiation.

11. (Amended) A method according to [any of claims 1 to 10] claims 1 or 2 in which CNS damage is detected and/or quantified in order to evaluate the effect of a certain treatment on said CNS damage.

15. (Amended) A kit according to claim [14 for use in any method according to claims 1 to 11] 16, wherein the marker is tau.

16. (Amended) A kit according to [claims 13 and/or] claim 14 characterised in that said kit comprises:

- a monoclonal antibody (primary antibody) which forms an immunological complex with an epitope of tau;
- a secondary antibody
  - which can be a monoclonal antibody recognising an epitope of the tau-primary antibody complex, but not recognising the primary antibody alone, or
  - which can be a polyclonal antibody recognising an epitope of the tau-primary antibody complex but not recognising the primary antibody alone, with said polyclonal antibody being preferably purified by immuno affinity chromatography using immobilized tau or immobilized tau-primary antibody complex;
- a marker either for specific tagging or coupling with said secondary antibody,